

**UNITED STATES DISTRICT COURT  
CENTRAL DISTRICT OF CALIFORNIA**

**REQUEST FOR ATTORNEY ADMISSION INFORMATION**

To: Deputy Clerk

Date: \_\_\_\_\_

From: \_\_\_\_\_  
*Name of Requestor*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Telephone Number*

\_\_\_\_\_  
*City, State, Zip Code*

Re: I hereby request the following:

- ☐ **Certificate of Good Standing** (for attorneys currently admitted to the bar of this Court).

Name of Attorney	CA State Bar No.	No. of Certificates	Fee*
_____	_____	_____	\$15.00
_____	_____	_____	\$15.00
_____	_____	_____	\$15.00

- ☐ **Duplicate Admission Certificate**

Name of Attorney	CA State Bar No.	No. of Certificates	Fee*
_____	_____	_____	\$15.00
_____	_____	_____	\$15.00
_____	_____	_____	\$15.00

Original certificate is: ☐ Lost ☐ Damaged ☐ Destroyed ☐ Name changed  
☐ Other \_\_\_\_\_

(Original certificate must be returned, if available.)

- ☐ **Verification of Admission**

Name of Attorney	CA State Bar No.	Search Fee
_____	_____	\$26.00
_____	_____	\$26.00
_____	_____	\$26.00

\* A \$26.00 search fee will be charged in addition to the \$15.00 certificate fee if a search is necessary. If more than one certificate is requested on this form for the same attorney, and a search fee is necessary, one search fee will be charged plus \$15.00 for each certificate.

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Make cashier's check, certified bank check, business or corporate check, government issued check or money order drawn on a major America bank or the United States Postal Service payable to **Clerk, U. S. District Court. PERSONAL CHECKS ARE NOT ACCEPTED.**

Mail this completed form and fee to:

Attn: Fiscal Section  
United States District Court  
Central District of California  
312 N. Spring Street, Room 529  
Los Angeles, California 90012

Note: Requests will be processed within three (3) working days of receipt. Please allow an additional three (3) days for mailing. If you do not receive the certificate or verification within that time, you may call (213) 894-0065.